DRAFT MINUTES

CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC) AND EMS CLINICAL COORDINATORS

Location: CHA, 110 Barnes Rd, Wallingford, CT

November 12, 2015 - 10AM

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone, James Parker, David Cone

OEMS Staff: Wendy Furniss, John Spencer, Richard Kamin

Guests: Joe Larcheveque, Ryan Carter, Jim Santacroce, Mike Zanker, Kevin Burns, David Bailey, Glenn Arremony, Nancy

Brunet,, Paul Rabeuf, Mark Cicero

Chaired By: Richard Kamin, M.D., Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the October 2015 CEMSMAC meeting were reviewed.	Motion to accept as submitted made by Dr. Cone and second by Dr. Gallo – unanimous approval.

DPH/OEMS Report	 EMS training coordinator position posted, EMS director position expected to follow soon EMS instructors Hold on new instructor applications (700 total in CT) Training Standards and criteria are being reviewed Mechanism for state to assess updated content and delivery consistency
SCT Review Process Update (Gallo/Carter)	 Process ongoing. Basic formulary and educational content goals have been reviewed and updated. Information given to Education and Training committee to review and assist with training program formulation. Ongoing CEMSMAC initiative to develop expectations and assess support for SCT level provider. Goal of more widespread acceptance and implementation with this SCT version. Discussed: SCT Training standards Skill sets above paramedic to be codified Just in time training for newer meds, etc

	Medical Director has final call on specific SCT medication and standard questions while we are updating the SCT program.
Election of Co-Chair (Group)	 Nominations from the floor called for – no further nominations returned Kyle McClaine re-elected (Kamin, Cone, Unanimous)
CEMSMAC involvement with legislative process (McClaine)	 Consider submitting possible proposals. Speak to your local reps, as your influence on their vote matters. Medical directors play key role in influencing public health initiatives.
Regional MAC Reports (regional reps)	 Region I: Gallo: CSpine/ SCT/ Min Equip list to be discussed Nov 18 Region II: Cone: State wide protocol feedback discussed. Only Yale responded. Individual medical directors giving feedback to Cone in absence of meeting, Submitted to CEMSMAC Region III: Bailey: guidelines reviewed, list submitted to CEMSMAC Region IV: McClaine: Guidelines reviewed and proposed list submitted to CEMSMAC Region V Begg: Next Region V meeting November 19th Trauma Guidelines and prehospital activation opportunities State guidelines protocol draft sent to Region V for review & sent back to CEMSMAC

Potential research regarding pre-hospital spine injuries (Cone)	 AEMT: WCHN open forum meeting set for December 2nd with all WCHN AEMT providers Reviewed draft proposal for Retrospective analysis of all traumatic spine fractures managed in CT hospitals since SMR guideline adoption Nov 2014. Attempt to determine how EMS extrication, movement, and transport was conducted, and any subsequent clinical effects. No attempt to scrutinize cases for provider error, rather to examine the SMR guideline for safety and efficacy. Data will be secured through Yale IRB, reported in aggregate, will not identify individual hospitals or EMS agencies 	 Regions are asked to participate which will include collecting their own data to submit. Need EMS ePCR, ED Record, Discharge summary, Final diagnoses related to spine
Needed Revisions to State Minimum Equipment List (Group)	Please review with regional MACs and individual services.	 Discussion, vote and final list will be completed by.March 2016 Please send comments for consideration to Dr. McClaine (kyle.mcclaine@hhchealth.org)

Revision of State DNR/Discontinuation of Resuscitation Doc (Kamin/Bailey)	• Tabled	Will remain on agenda
Statewide Unified Guidelines	Draft distributed to CEMSMAC Regional Representatives	 Plan for 60 day review then back to the CEMSMAC at December meeting for any needed changes
CMED	Tabled	 To remain on the agenda Discussion re potential utility to write up Region II experience for historical perspective
EMS Destination Guidelines	Awaiting clarification of legality of restriction on patient autonomy from DPH	Will remain on agenda
Potential Role of Medication Pumps in Statewide Protocols (Cone)	 Required in other states. Not currently required in our proposed State Guidelines. All other New England states mandate. Discussion as to literature support for necessity given cost. 	Will continue to discuss at next months meeting, along with rest of State Guidelines.
State \$ cuts and impact on EMS:	• Discussion	Continue to pressure your local elected reps to act.
Mobile Integrated Healthcare (Bailey/group)	 Waiting for further direction from DSS & state. Discussed utility of restarting meetings to draft expected requests. 	•

• AEMT	Await Reg V & WCHN meetings later this month	Update at Dec CEMSMAC
Adjourned	Next CEMSMAC meeting is scheduled for November 10, 2015 @ 10:00 am.	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD